

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In re: _____x

CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF
NEW YORK
Case No. 16-74455
Chapter 7 PR 26 A 11:15

RECEIVED

ANTHONY ROSS

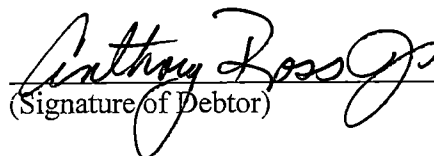
Debtor(s) _____x

AFFIDAVIT PURSUANT TO E.D.N.Y. LBR 1009-1(a)

ANTHONY ROSS

undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter _____ of the Bankruptcy Code on 9/28/16.
2. Filed herewith is an amendment to D [indicate list(s), schedule(s) or statement(s) being amended] previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.
4. [If creditor records have been added or deleted, or mailing addresses corrected] An amended mailing matrix is annexed hereto, reflecting only changes adding or deleting as have been referred to above.

Dated: 4/26/18

 (Signature of Debtor)
Sworn to before me this _____
day of _____,_____
Notary Public, State of New York**Reminder: No amendment of schedules is effective until proof of service in accordance with E.D.N.Y. LBR 1009-1(b) has been filed with the Court.**

If this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within which any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. This motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affidavit, all attachments and the amended schedules in accordance with EDNY LBR 1009-1.

Fill in this information to identify your case:

Debtor 1 ANTHONY T. ROSS JR
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number 16-74455
 (If known)

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
---	--	--

2.1 BANK OF AMERICA, N.A.

Describe the property that secures the claim:

\$ 52,500.00	\$ 0.00	\$
--------------	---------	----

Creditor's Name
P.O. BOX 27052
Number Street

5801 ROCK SPRINGS RD.
LITHONIA, GA 30038

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

TAMPA FL 33625
City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)

☐ Check if this claim relates to a community debt

Date debt was incurred 09/24/2007Last 4 digits of account number 1 8 9 9

2.2 BAC Home Loans Servicing, LP

Describe the property that secures the claim:

\$ 52,500.00	\$ 0.00	\$
--------------	---------	----

Creditor's Name
7105 Corporate Drive
Number Street

5801 ROCK SPRINGS RD.
LITHONIA, GA 30038

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Plano TX 75024
City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)

☐ Check if this claim relates to a community debt

Date debt was incurred 09/24/2007Last 4 digits of account number 1 8 9 9

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 105,000.00

Debtor 1 **ANTHONY T. ROSS JR** Case number (if known) **16-74455**

First Name Middle Name Last Name

Part 1:	Additional Page	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.3	NYS Department of State Describe the property that secures the claim: <u>2254 Fifth Avenue, NY NY 10037</u> Creditor's Name <u>123 William Street</u> Number Street <u>New York NY 10038</u> City State ZIP Code As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number _____	\$ _____	\$ _____	\$ _____
2.4	NYS Department of Taxation Describe the property that secures the claim: <u>2254 Fifth Avenue, NY NY 10037</u> Creditor's Name <u>P.O. Box 5300</u> Number Street <u>Albany NY 12205</u> City State ZIP Code As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number <u>6 1 6 6</u>	\$ <u>935.89</u>	\$ <u>935.89</u>	\$ _____
2.6	Stacey Robinson Describe the property that secures the claim: <u>2254 Fifth Avenue New York NY 10037</u> Creditor's Name <u>3250 Perry Avenue, 3A</u> Number Street <u>Bronx NY 10467</u> City State ZIP Code As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>08/23/2017</u> Last 4 digits of account number <u>1 0 9 3</u>	\$ <u>27,000.00</u>	\$ <u>0.00</u>	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here: <u>27,935.89</u> If this is the last page of your form, add the dollar value totals from all pages. Write that number here: _____				

Debtor 1

ANTHONY T. ROSS JR
 First Name Middle Name Last Name

Case number (if known) **16-74455****Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

24**RUBLIN LUBLIN, LLC**

Name

3145 AVALON RIDGE PLACE, STE. 100

Number Street

PEACHTREE CORNERS

GA

30071

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? 1Last 4 digits of account number 1 8 9 9

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number 1 8 9 9

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Fill in this information to identify your case:

Debtor 1 ANTHONY T. ROSS
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number (if known) 16-74455

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

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- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
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Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim.	Column C Unsecured portion If any
--	---	--

2.1	BSI FINANCIAL SERVICES Creditor's Name 314 S. FRANKLIN STREET Number Street P.O. BOX 517 TITUSVILLE PA 16354 City State ZIP Code	Describe the property that secures the claim: 20 INGRAHAM LANE HEMPSTEAD, NY 11550 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>MORTGAGE</u>	\$ 360,000.00	\$ 284,800.00	\$
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred		Last 4 digits of account number <u>6 7 1 1</u>			

2.2	Office of the receiver of taxes Creditor's Name 200 N. Franklin Street Number Street Hempstead NY 11550 City State ZIP Code	Describe the property that secures the claim: 20 INGRAHAM LANE HEMPSTEAD, NY 11550 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset)	\$ 4,877.16	\$ 284,800.00	\$
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred		Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 364,877.16

Debtor 1 **ANTHONY T. ROSS**
 First Name Middle Name Last Name

Case number (if known) **16-74455**

Part 1:	Additional Page	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.9	MR. COOPER Creditor's Name 8950 Cypress Waters Blvd Number Street Coppell TX 75019 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 06/06/2017	Describe the property that secures the claim: 5725 Cape Code Lane Lithonia, GA 30038 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number 0 2 1 3	\$ 21,971.83	\$ 0.00
3.1	FANNIE MAE Creditor's Name 3900 WISCONSIN AVE Number Street WASHINGTON DC 20016 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 06/06/2017	Describe the property that secures the claim: 5725 Cape Code Lane Lithonia, GA 30038 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number 0 2 1 3	\$ 21,971.83	\$ 0.00
3.2	ERIK CLAYTON Creditor's Name 4850 37TH STREET Number Street APT. F Long Island City NY 11101 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 08/23/2017	Describe the property that secures the claim: 2254 Fifth Avenue New York NY 10037 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number 1 0 9 3	\$ 27,000.00	\$ 0.00
Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		<div style="border: 1px solid black; padding: 5px;">\$ 70,943.66</div> <div style="border: 1px solid black; padding: 5px;">\$ </div>		

Debtor 1

ANTHONY

T.

ROSS

First Name Middle Name Last Name

Case number (if known) 16-74455

Part 2: List Others to Be Notified for a Debt That You Already Listed

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3.3

MCCALLA RAYMER LEIBERT PIERCE, LLC

Name

1544 OLD ALABAMA ROAD

Number Street

ROSWELL

GA

30076

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? 3.4

Last 4 digits of account number 9 8 9 7

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number 6 7 1 1

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Fill in this information to identify your case:

Debtor 1 ANTHONY T. ROSS
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing)
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number 16-74455
 (if known)

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Official Form 106D

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Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
---	--	--

34 BRONX SUPREME COURT Creditor's Name 851 GRAND CONCOURSE Number Street BRONX NY 10451 City State ZIP Code	Describe the property that secures the claim: 2254 Fifth Avenue New York NY 10037 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred <u>08/23/2017</u> Last 4 digits of account number <u>1 0 9 3</u>	\$ _____ \$ _____ \$ _____
35 Office of the receiver of taxes Creditor's Name 200 N. Franklin Street Number Street Hempstead NY 11550 City State ZIP Code	Describe the property that secures the claim: 35 Ingraham St. AKA 6 Oak Avenue Hempstead, NY 11550 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number _____	\$ <u>14,403.97</u> \$ _____ \$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ <u>14,403.97</u>

Debtor 1

ANTHONY

T.

ROSS

Case number (if known) 16-74455

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports this
claim

Column C

Unsecured
portion
if any

3.4

Carrington Mortgage Services

Describe the property that secures the claim:

\$ 91,184.00

\$ 0.00

\$

Creditor's Name

1600 SOUTH DOUGLASS RD.

Number Street

6236 Katelyn Park
Lithonia, GA 30058

Anaheim

CA 92803

City

State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred 6/26/2005

Last 4 digits of account number 8 7 1 1

3.7

Wilmington SavingsFundSociety

Describe the property that secures the claim:

\$ 91,184.00

\$ 0.00

\$

Creditor's Name

Number Street

1600 SOUTH DOUGLASS RD.

ANABEIM

CA 92803

City

State ZIP Code

6236 Katelyn Park Lithonia, GA 30058

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset) MORTGAGE

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred 06/23/2005

Last 4 digits of account number 8 7 1 1

3.8

JP MORGAN CHASE BANK NA

Describe the property that secures the claim:

\$ 130,000.00

\$ 45,000.00

\$

Creditor's Name

3415 VISION DRIVE

Number Street

COLUMBUS

OH 43219

City

State ZIP Code

6433 PARKWAY TRACE
LITHONIA, GA 30058

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred 10/10/2006

Last 4 digits of account number 9 8 9 7

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 312,368.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$

Debtor 1

ANTHONY

T.

ROSS

First Name

Middle Name

Last Name

Case number (if known) 16-74455

Part 2: List Others to Be Notified for a Debt That You Already Listed

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☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number 1 0 9 3

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

Fill in this information to identify your case:

Debtor 1	<u>ANTHONY</u>	<u>T.</u>	<u>ROSS</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of New York			
Case number (If known)	<u>16-74455</u>		

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
--	--	--

39 **NU ALLIANCE COMPANY**

Creditor's Name
7000 EUNICE DRIVE

Number Street

RIVERDALE GA 30274

City State ZIP Code

Describe the property that secures the claim:

20 INGRAHAM LANE
HEMPSTEAD, NY 11550

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

\$ _____	\$ _____	\$ _____
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41 **Nassau County Depart Assess**

Creditor's Name
240 Old Country Road

Number Street

Mineola NY 11501

City State ZIP Code

Describe the property that secures the claim:

20 Ingraham Lane
Hempstead, NY 11550

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☒ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

\$ <u>9,754.33</u>	\$ _____	\$ _____
--------------------	----------	----------

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ <u>9,754.33</u>

Debtor 1

ANTHONY

T.

ROSS

Case number (if known) 16-74455

Additional Page**Part 1:**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim
Do not deduct the
value of collateral.

Column B

Value of collateral
that supports this
claim

Column C

Unsecured
portion
If any**4.2****Nassau County Depart Assess**

Describe the property that secures the claim:

\$ 17,590.67

\$

\$

Creditor's Name

240 Old Country Road

Number Street

6 Oak Avenue
Hempstead, NY 11550

Mineola

NY 11501

City

State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

4.3**Office of the County Treasurer**

Describe the property that secures the claim:

\$ 14,403.97

\$ 0.00 \$

Creditor's Name

1 West Street

Number Street

6 Oak Avenue Hempstead, NY 11550

Mineola

NY 11501

City

State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number 0 8 7 0

4.4**Office of the Receiver of taxes**

Describe the property that secures the claim:

\$

Creditor's Name

200 No. Franklin Street

Number Street

20 Ingraham Lane, Hempstead NY 11550

Hempstead

NY 11550

City

State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
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☒ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☒ Debtor 1 only
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☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number 0 0 0 6

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 31,994.64

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$

Debtor 1

ANTHONY

T.

ROSS

First Name

Middle Name

Last Name

Case number (if known) 16-74455

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

Fill in this information to identify your case:

Debtor 1 **ANTHONY T. ROSS**
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number **16-74455**
 (If known)

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

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Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim.	Column C Unsecured portion if any
--	---	--

45 Office of the Receiver of taxes Creditor's Name 200 No. Franklin Street Number Street Hempstead NY 11501 City State ZIP Code	Describe the property that secures the claim: 35 Ingraham Street Hempstead, NY 11550 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number 0 0 8 7	\$ 10,127.83 \$ 0.00 \$
46 Village of Hempstead Creditor's Name 89 Nichols Court Number Street Hempstead NY 11550 City State ZIP Code	Describe the property that secures the claim: 35 Ingraham Street Hempstead, NY 11550 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) _____ Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number _____	\$ 10,587.05 \$ \$
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 20,714.88

Debtor 1

ANTHONY

T.

ROSS

Case number (if known) 16-74455

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim
Do not deduct the
value of collateral

Column B

Value of collateral
that supports this
claim

Column C

Unsecured
portion
If any

Describe the property that secures the claim:

\$ \$ \$

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

Describe the property that secures the claim:

\$ \$ \$

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.

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☐ Debtor 1 and Debtor 2 only
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☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

Describe the property that secures the claim:

\$ \$ \$

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who owes the debt? Check one.

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☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
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☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$	
\$	957,992.53

Debtor 1

ANTHONY

T.

ROSS

First Name

Middle Name

Last Name

Case number (if known) 16-74455

Part 2: List Others to Be Notified for a Debt That You Already Listed

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☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Number _____ Street _____

Last 4 digits of account number _____

City _____ State _____ ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Number _____ Street _____

Last 4 digits of account number _____

City _____ State _____ ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Number _____ Street _____

Last 4 digits of account number _____

City _____ State _____ ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Number _____ Street _____

Last 4 digits of account number 0 0 8 7

City _____ State _____ ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Number _____ Street _____

Last 4 digits of account number _____

City _____ State _____ ZIP Code _____

☐

Name _____

On which line in Part 1 did you enter the creditor? _____

Number _____ Street _____

Last 4 digits of account number _____

City _____ State _____ ZIP Code _____